

ELECTRONIC INFORMATION DISCLOSURE STATEMENT

Electronic Version v18

Stylesheet Version v18.0

| Title of Invention | An Improved Portable Auxiliary Vehicle/ Automobile Warning Device | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
|--|---|------------|------------|---------------|------|-------|----------|---------------|----------|------------|------|----------|------|-------|----------|--|---|---------|------------|------|--|--|--|--|---|---------|------------|---------------|--|--|--|--|---|---------|------------|----------|--|--|--|--|---|---------|------------|-------|--|--|--|
| <p>Application Number : Confirmation Number: First Named Applicant: Joel Fried Attorney Docket Number: 236105102004 Art Unit: Examiner: Search string: (4361828 or 3299552 or 2843952 or 2503336).pn</p> | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| <h3>US Patent Documents</h3> <p>Note: Applicant is not required to submit a paper copy of cited US Patent Documents</p> <table border="1"><thead><tr><th>init</th><th>Cite.No.</th><th>Patent No.</th><th>Date</th><th>Patentee</th><th>Kind</th><th>Class</th><th>Subclass</th></tr></thead><tbody><tr><td></td><td>1</td><td>4361828</td><td>1982-11-30</td><td>Hose</td><td></td><td></td><td></td></tr><tr><td></td><td>2</td><td>3299552</td><td>1967-01-24</td><td>Newman et al.</td><td></td><td></td><td></td></tr><tr><td></td><td>3</td><td>2843952</td><td>1958-07-22</td><td>Zgraggen</td><td></td><td></td><td></td></tr><tr><td></td><td>4</td><td>2503336</td><td>1950-04-11</td><td>Hines</td><td></td><td></td><td></td></tr></tbody></table> | | | | | | | | init | Cite.No. | Patent No. | Date | Patentee | Kind | Class | Subclass | | 1 | 4361828 | 1982-11-30 | Hose | | | | | 2 | 3299552 | 1967-01-24 | Newman et al. | | | | | 3 | 2843952 | 1958-07-22 | Zgraggen | | | | | 4 | 2503336 | 1950-04-11 | Hines | | | |
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| <h3>Signature</h3> <table border="1"><tr><td>Examiner Name</td><td>Date</td></tr><tr><td></td><td></td></tr></table> | | | | | | | | Examiner Name | Date | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Examiner Name | Date | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
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